

mechanical ventilation, and pulmonary transplantation amongst others. "AIDS and the lung" and "tuberculosis" which overlap are accommodated together in 34 pages. There are short sections on cystic fibrosis and pleural disease. The distribution of abstracted articles probably represents the editors' personal interests since, for example, there are 78 pages on COPD but only 16 on occupational lung disease and 26 on lung cancer. Each article considered is abstracted briefly under the headings of background, methods, results, and conclusions and then is followed by a discussion of the article (and often a wide discussion of related topics) over the byline of one of the editors. Additional references are included, perhaps up to six per comment.

A new and interesting feature is that each chapter is preceded by a separately written article up to six pages long by an expert in the field surveyed. These review a literature quite separate from the papers abstracted. The excellent "recent advances" review by Cherniak and Kvale on diagnostic procedures in pulmonary medicine, for example, systematically reviews the topic with 37 references to papers between 1987 and 1991, 31 of which were published in 1990–2. By comparison, following this just five articles published in 1990–1 are abstracted and only one of these was picked out by the expert "recent advances" reviewers. Similarly, the two page introductory review by Lillington on lung cancer considers 18 papers, 10 of which were published in 1990 or 1991; none of these were abstracted and reviewed in the 26 pages and 16 papers which follow.

So what is the general reader to conclude? It seems to me that the "recent advances" reviews probably represent a more accurate overview of the topics under consideration than the abstracted papers. The way in which these were chosen is not made clear. Some of the comments by the editors are, quite surprisingly, limited to discussions of their own practice. Even with these drawbacks, however, there is inevitably in a book of this length a great deal to interest the academically inclined physician and I found myself making many mental notes of papers to read more fully.

There are several abstracting services now available and regular users of these will not find much to interest them here. The book ought to have a wider appeal to physicians who like to have their up to date information in an accessible format with a critical introduction to the literature which should enable them to select carefully papers for particular attention. Likewise, using the subject and author indices a series of these books could represent an excellent way into the pulmonary literature for readers finding the electronic search systems unsatisfactory or wishing to have an alternative source.—MFM

**Clinical Pulmonary Medicine.** 1st ed. Lyle D Victor. (Pp 500; £43.) New York: Churchill Livingstone, 1992. ISBN 0 316 90246 2.

The preface of this book states that it is a practical book written to fill the large void in pulmonary text directed at the primary care physician. That goal is not achieved. The detail and balance of the chapters are inconsistent, varying on one hand from a 13 page chapter on normal sleep through

to a complex discussion of physiological measurements and invasive pulmonary investigations. Any book aimed at the primary care physician must be judged on its handling of the common conditions such as airflow obstruction, infections, thromboembolic disease, and cancer. The chapter on asthma is disappointing and emphasises the different management approach in North America with five and a half columns on theophyllines, one and a half columns on ephedrine, and half a column on inhaled steroids. The sole statement that "education and regular follow up of the patient is necessary for successful treatment" does little to guide the primary care physician in a management plan for asthmatic subjects. The details of pulmonary angiograms and pulmonary artery pressure may be of interest to some general practitioners, but most may prefer guidance on how long to anticoagulate their patients. The very important subject of symptomatic and palliative management of lung cancer patients is barely mentioned except for the statement that "it is obligatory for physicians to observe carefully for recurrence or a second primary in their patients." There are some gems—notably the excellent chapters on interstitial lung disease and tuberculosis—but I do not think that general practitioners, generalists, or respiratory specialists will lose out by not having this text on their bookshelf—JMcF.

If you wish to order or require further information regarding the titles reviewed here, please write to or telephone the BMJ Bookshop, PO Box 295, London WC1H 9JR. Tel: 071 383 6244. Fax 071 383 6662. Books are supplied post free in the UK and for BFPO addresses. Overseas customers should add 15% for postage and packing. Payment can be made by cheque in sterling drawn on a UK bank or by credit card (Mastercard, Visa or American Express) stating card number, expiry date and full name. (The price and availability are occasionally subject to revision by the Publishers.)

## NOTICES

### 23rd Annual Fleischner Society symposium on chest disease

The 23rd Annual Fleischner Society symposium on chest disease will be held at the Westin Copley Place, Boston, Massachusetts on 6–8 May 1993. Further information can be obtained from the Fleischner Society, PO Box 16502, Irvine, California 92713–6502, Telephone (800) 321–6338, Fax (714) 752–7444.

### Seventh World Conference on Lung Cancer

The International Association for the Study of Lung Cancer will hold its Seventh World Conference on Lung Cancer from 26 June to 1 July 1994 at the Broadmoor Resort in Colorado Springs, Colorado, USA.

Further information can be obtained from Linda Wise, Centennial Conferences, 5353 Manhattan Circle, Suite 103, Boulder, Colorado 80303, USA (telephone (303) 499 2299; fax (303) 499 2599).

### Molecular biology of asthma

A two day course covering the basic principles of molecular biology and its application to the diagnosis, understanding, therapy, and future treatment of asthma will be held on 5 and 6 July 1993 at the National Heart and Lung Institute, London SW3 (course organisers: PJ Barnes and AB Kay). Further information from Education and Conference Centre, National Heart and Lung Institute, Dovehouse Street, London SW3 6LY (Tel 071 351 8172; Fax 071 376 3442).

### Pharmacology of asthma

A course on the pharmacology of asthma will be held from 29 November to 2 December 1993 at the National Heart and Lung Institute, London SW3 (course organiser PJ Barnes). Further information from Education and Conference Centre, National Heart and Lung Institute, Dovehouse Street, London SW3 6LY (Tel 071 351 8172; Fax 071 376 3442).

### Lung pathology

A comprehensive course of lectures and practical hands on microscopy sessions will be held at the National Heart and Lung Institute, Brompton Hospital, London on 26–29 October 1993 aimed at pathologists in training and consultant pathologists wishing to update their knowledge of lung pathology. Places are limited to 24. Fee £220 (US\$360). Programme and application form from Professor B Corrin, Pathology, Brompton Hospital, London SW3 6NP (Fax 071 351 8435).

### 11th Biennial Asian Congress on Thoracic and Cardiovascular Surgery

The 11th Biennial Asian Congress on Thoracic and Cardiovascular Surgery will be held on 21–25 November 1993 in Kuala Lumpur, Malaysia. Further details may be obtained from: 11th BACTCS Secretariat, Room 3, 5th Floor, MMA House, 124 Jalan Pahang, 53000 Kuala Lumpur (Tel 03 4429662; Fax 03 4421618).

### LASER M2P

The third international conference LASER M2P covering the fields of material engineering, medicine and biology, and physics and chemistry will be held in Lyon, France on 8–10 December 1993. Details from Richard Moncorge, Conference Cochair, Université de Lyon, Bat. 205, F-69622 Villeurbanne Cedex, France. (Tel (33) 72 43 11 30).

### Thorax editorial office

The Editorial Office of *Thorax* will be moving on 1 May 1993. The new address will be Thorax Editorial Office, Private Patients' Wing, University College Hospital, 25 Grafton Way, London WC1E 6DB, and all papers submitted after 1 May should be sent to the Executive Editor, Dr S Spiro, at that address.